

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	HL		6-10-07
O.I.E. CLASSIFIER			
FORMALITY REVIEW	KD	1121	9-13-2001
RESPONSE FORMALITY REVIEW	MD	1121	11/14/01

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 - (Through numeral)..... Canceled
 + Restricted
 N Non-elected
 I Interference
 A Appeal
 O Objected

Claim	Date
Final	
Original	
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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BEST AVAILABLE COPY

2esp 781
11-14-01